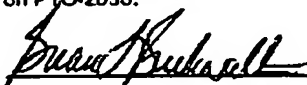
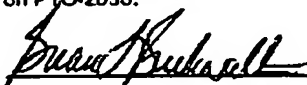
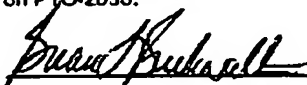


PTO/SB/22 (03-03) Approved for use through 7/31/2006. CMB 0651-0031 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE <small>Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.</small>													
PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)													
Docket Number (Optional) R0027D-CON													
In re Application of: Percy Manchand, et al.													
Application Number: 10/781,120	Filed: February 18, 2004												
1,3-DIHYDROXY-20,20-ALKYL VITAMIN D₃ ANALOGS													
Art Unit: 1616	Examiner: Sabiha Naim Qazi												
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><tr><td><input type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$450.00</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$ _____</td></tr></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge \$450.00 and any additional fees that may be required to Deposit Account No. 16-1700</p> <p>I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number 46,585 <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <table><tr><td><u>March 16, 2005</u> Date (650) 855-6995 Telephone Number</td><td> Signature Brian L. Buckwalter (Typed or printed name)</td></tr></table> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ form(s) are submitted.</p>		<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____	<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____	<u>March 16, 2005</u> Date (650) 855-6995 Telephone Number	 Signature Brian L. Buckwalter (Typed or printed name)
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ _____												
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450.00												
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____												
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____												
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____												
<u>March 16, 2005</u> Date (650) 855-6995 Telephone Number	 Signature Brian L. Buckwalter (Typed or printed name)												

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22312-1450.

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